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3rd World Congress on

## Traditional and Complementary Medicine

September 10-11, 2018 Auckland, New Zealand

Utility of homoeopathy to mitigate unmet needs of primary healthcare in villages of India: Community based model, achievements and challenges

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Tomoeopathic medicines are proven to be effective in treating large number of acute as well as chronic ailments and have Lzero side effects. The successful treatment ensues when a physician understands dimensions of the disease in the holistic homoeopathic perspective and accordingly prescribes. Despite cost effectiveness, homoeopathy offers promising public health benefits to maintain as well as restore health in most natural ways by helping to avoid overuse of antibiotics, eventually boosting individual's immunity. Hence integrating homoeopathy with modern medicine is critical to mitigate huge unmet needs of primary healthcare in India, especially where accessibility of healthcare provider is key concerns for rural masses. India relies on a three-tier public health system, the first one being Health Sub-Centers (HSC). HSCs, manned by a trained nurse, are meant to cater to a population of 5,000. Consulting a doctor is through a Primary Health Center (PHC) exists for every 30,000 people. Hence patients need to travel to seek a doctor's consultation. Further, challenges related to infrastructure and competent paramedical personnel at peripheral health facilities still exist. Despite proven efficacy, availability of alternative medicine practitioner such as a homoeopath is only at the block level, typically for a population of 1 lakh. In such a scenario rural people have no choice but to seek care from local quacks that provide service at the villagers' doorsteps. To fulfill villagers' primary healthcare needs, guided women collectives in villages of Uttar Pradesh state in India initiated Gaon Dawakhana (A village clinic) with 1,000 families in January 2017. It is a community funded integrated primary healthcare service delivery platform through a homoeopathic doctor visiting weekly twice and a Modern Medicine doctor visiting monthly twice to provide medical services at doorsteps for villagers. Unit of one clinic is a collective of 500 families, each contributing 50 INR per family per month to seek services of a clinic. Except for the administrative cost (which is being funded by Tata Trusts), entire operational cost of clinics (including doctors' fees, medicines' cost, etc.) is met through the monthly subscription fees. Since January 2017, total 31,919 patients are treated across 10 clinic locations benefitting to more than 5,000 families. Through 15 quarterly health camps for non- communicable diseases, child health issues etc. 3,132 patients are treated. One of the important challenges faced is overcrowding at clinics and difficulty to maintain stock of key homoeopathic medicine owing to its availability at remote places. Major learning from the initiative is, homoeopathy as an alternative system, can be integrated with modern medicine to mitigate unmet needs of primary health care of rural masses because of its efficacy and cost effectiveness. Continuous community contribution is sign of acceptability towards homoeopathy and it also ensures sustainability for the initiative. Further it demystifies the common notion that rural poor are always in need of free services. It is appreciated that, though economically vulnerable, families are willing to pay, if they perceive value in services. Both the initiative itself and the homeopathy have got promising potential to meet primary healthcare needs for rural masses.

## **Biography**

Sandeep A Chavan is a Homoeopathic Doctor, Postgraduate in Public Health Administration from Tata institute of Social Sciences, Mumbai, India. He has been working as a Program Officer for Healthcare initiatives at Tata Trusts. His area of experience is across maternal and child health, vector borne diseases, mental health and primary healthcare. He is passionated towards promoting and mainstreaming Homoeopathy for better public health outcomes.

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